

# Developing a Role Specific 360 Evaluation

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**Problem:** The ACGME requires a 360 Evaluation for all residents. Previously we used the same form for all evaluators regardless of role. The response rate was low and many comments were not constructive or skills focused.

**Goal:** Design and implement a role specific 360 Evaluation  
**Objectives:** Identify items specific to evaluators' roles, improve quality and quantity of feedback.

## Assumptions

- \* Feedback is useful
- \* Residents' skill improves with feedback
- \* Patient care will improve
- \* Clinic staff want residents to improve

## Resources

- \* Core Competencies
- \* Invested staff
- \* Committee of 3 volunteered
- \* Our previous 360 form
- \* Internet examples of 360s

## Activities

- \* Design 360 specific to clinic roles
- \* Personal instruction for each group
- \* Time in meeting to complete
- \* Administer 360 Evaluation

## Outputs

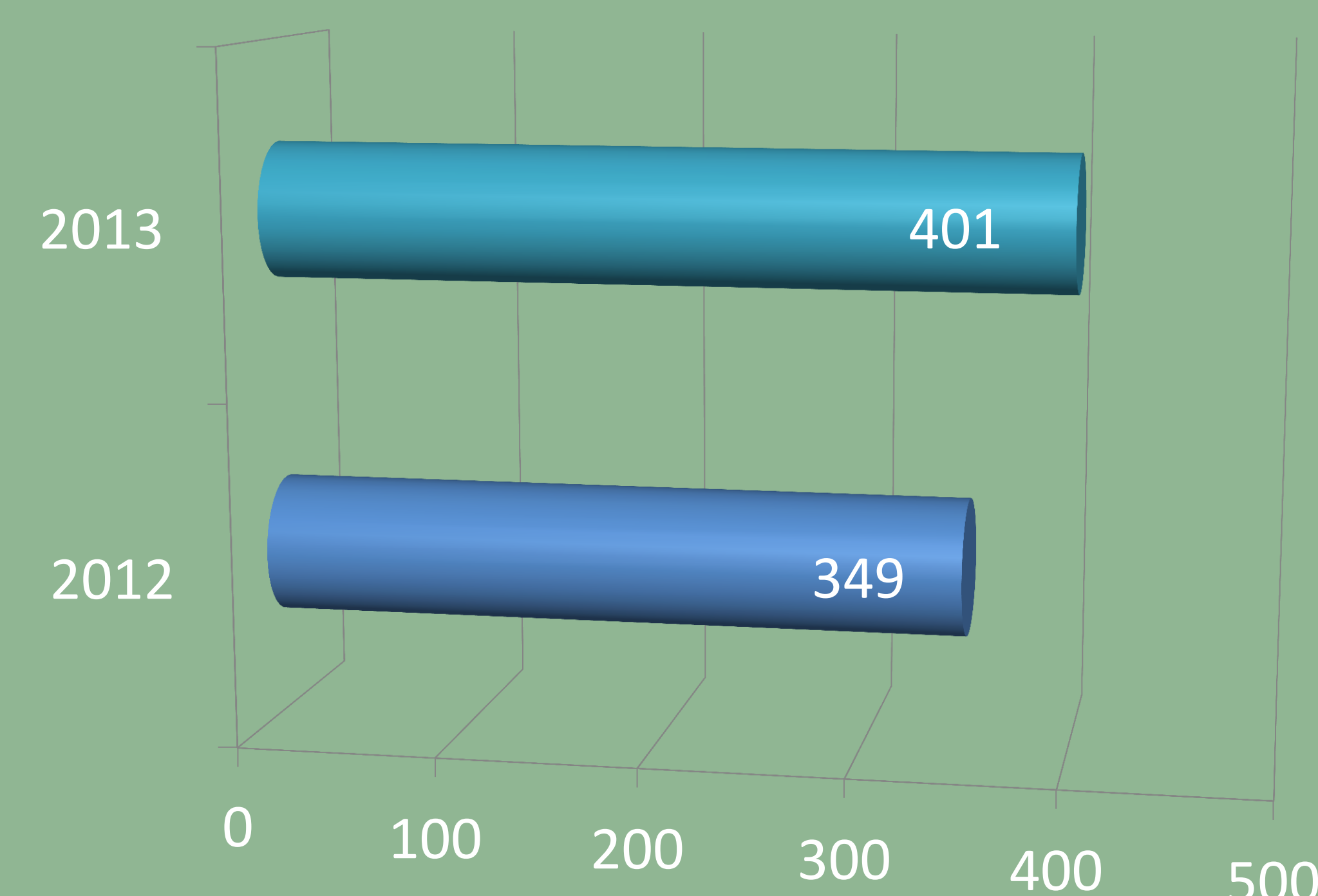
- \* Role-specific forms for:  
Nursing  
Office Staff  
Faculty & Residents
- \* Summary sheet of anonymous feedback for each resident

## Outcomes

- \* Feedback reviewed with resident by faculty advisor
- \* Quality of feedback improved:  
More skills focused comments
- \* Higher rate of response

## Post 360 Evaluation Process Feedback

Number of Evaluations Completed



Item	% Agree
I think it's important to provide feedback to the residents.	96.4
I think it's important for residents to receive feedback from a variety of colleagues.	92.8
I was familiar with those for whom I provided feedback.	89.2
The length was manageable.	85.7
I had enough time to complete the forms.	75.0
It was important to me that the feedback was anonymous.	71.4
The items were specific to my role.	64.2
I think my input was valuable.	60.7

Process Improved?

